DOCUMENT RESUME

ED 188 774 PS 011 545

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TITLE Early Childhood Programs, Mental Health Services 1978-1979. Report No. 8054.
INSTITUTION Philadelphia School District, Pa. Office of Research and Evaluation.
PUB DATE Mar 80
NOTE 18p.

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Early Childhood Education: *Mental Health Programs: Program Descriptions: Program Evaluation: *Psychological Services
IDENTIFIERS Follow Through: Get Set Program: Pennsylvania (Philadelphia): Project Head Start

ABSTRACT

This 1978-1979 Mental Health Services report focuses on the types and quantities of mental health services provided to children in four Early Childhood Programs in Philadelphia: Get Set Day Care, Prekindergarten Head Start, Follow Through and Follow Through Expansion. Mental health services were provided by the Psychologists and Psychological assistants in Get Set Day Care, Mental Health specialists in Prekindergarten Head Start, and Mental Health Consultants in the Follow Through program. Data were obtained from a reporting form and from the contracted agencies' monthly or annual report(s) and invoice statements. Across the four programs, a total of 1419 children were seen by the mental health workers. Of these, 1149 (81%) received additional services. The most frequently identified impairments associated with program children were speech impairments, emotional problems, and developmental delays. Mental health workers provided direct services in the form of classroom observations, counseling or therapy sessions with children, and diagnostic treatment consultations with parents, staff and other program personnel. Services were most frequently provided, in order of frequency, to staff and other program personnel, children, and parents respectively. Indirect services consisted of conducting staff development sessions, making referrals and attending faculty or planning meetings. Across the four programs, the major emphasis in indirect services was on attending faculty or planning meetings. (Author)

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EARLY CHILDHOOD PROGRAMS MENTAL HEALTH SERVICES 1978-1979

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ABSTRACT

The 1978-1979 Mental Health Services report focuses on the types and quantities of mental health services provided to children in four Early Childhood Programs: Get Set Day Care, Prekindergarten Head Start, Follow Through and Follow Through Expansion. Mental health services were provided by the Psychologists and Psychological assistants in Get Set Day Care, Mental Health specialists in Prekindergarten Head Start, and Mental Health Consultants in the Follow Through program. Data were obtained from a reporting form designed by the Early Childhood Evaluation Unit and from the contracted agencies' monthly or annual report(s) and invoice statements.

Across the four programs, a total of 1419 children were seen by the mental health workers. Of these, 1149 (81%) received additional services. The most frequently identified impairments associated with program children were speech impairments, emotional problems, and developmental delays.

Mental health workers provided Direct Services in the form of classroom observations, counseling or therapy sessions with children, and diagnostic/treatment consultations with parents, and staff and other program personnel. Services were most frequently provided, in order of frequency, to staff and other program personnel, children, and parents respectively. Indiredt Services consisted of conducting staff development sessions, making referrals and attending faculty or planning meetings. Across the four programs, the major emphasis in indirect services was on attending faculty or planning meetings.

EVALUATION OF MENTAL HEALTH SERVICES IN EARLY CHILDHOOD PROGRAMS, 1978/1979

I. INTRODUCTION

A. Program Description

The Office of Early Childhood Programs has the responsibility for managing, through coordination of all activities of the program directors and their staff, all early childhood programs in the School District of Philadelphia. Through its largest program alone, the Office of Early Childhood Programs provides comprehensive services (almost invariably in the form of four major components: 1. Educational/Developmental, 2. Parent Involvement, 3. Staff Development, and 4. Special Supportive Services) to almost 50,000 children in 500 sites. Mental Health Services were mandated in four Early Childhood Programs: Get Set Day Care, Prekindergarten Head Start (both pre-school programs), Original Follow Through, Follow Through Expansion (schoolage programs). This report focuses on the number and types of activities undertaken by the mental health workers in these programs.

B. Evaluation Techniques

Reporting forms were designed by the Early Childhood Evaluation Unit (ECEU) to be completed by the mental health specialist for Prekindergarten Head Start and the Psychological Services Supervisor for Get Set Day Care. Monthly or annual reports and invoice statements from the contracted agencies were obtained for the schoolage programs. Program proposals and contract agreements with the community mental health agencies were also obtained.

Data from all sources are shown in terms of frequencies and corresponding percentages.

C. Previous Findings

Generally, mental health services in the schoolage programs focused primarily on (1) children diagnosed as having a specific learning disability, (2) children diagnosed as being emotionally disturbed, and (3) those diagnosed as having a speech/hearing impairment. The prekindergarten programs placed major emphasis on the emotionally disturbed and speech/hearing impaired children.

Direct Consultation Services, i.e., diagnosed/treatment consultations were provided most frequently to children, staff, other program personnel, and parents. Indirect Consultation Services consisted of referrals, staff development sessions and faculty or planning meetings. Referrals were primarily provided in preschool programs and were not initiated by the mental health specialist in the schoolage program. Staff development was provided in all programs, with the consultants for Follow Through Expansion also attending faculty or planning meetings.

II. Evaluation Data/1978-1979

A. Evaluation Questions Addressed

1. How many children were observed, screened and/or evaluated in each program?

The number of children within each program that were observed, screened, and/or evaluated ranged from 6% to 19% depending upon program affiliation. The mental health specialist in Head Start and the psychologists and psychological assistants in Get Set were employed within their respective programs. As indicated in Table 1, 448 Get Set children, representing 11% of their average monthly enrollment, and 206 Head Start children, representing 19% of their enrollment, participated in the examination process. In Get Set, after the 448 children were observed or screened, 293 (65%) were identified as needing services, which were then provided. In Head Start 91 (44%) of the 206 children that were examined were so identified and received the required services.

In the Original Follow Through and Follow Through Expansion programs, mental health services were provided to children by community mental health agencies that had contracts to provide the required services. The services consisted mainly of classroom observations, counseling and therapy sessions and screenings for specific learning disabilities. They were interested in providing direct service to children and staff, not in assessment for placement. Four agencies had the responsibility for providing services to 8 of the 14 Original Follow Through schools: Hahnemann Medical College and Hospital of Philadelphia, Hall-Mercer Community Mental Health, Institute for Learning, and North Central Mental Health/Mental Retardation.

TABLE I

CHILDREN WITHIN EACH PROGRAM
REQUIRING AND RECEIVING MENTAL HEALTH SERVICES

Program	Period Of Service Availability	Sites Encompassed In Data	Average Monthly Enrollment	Children Observed or Screened or Evaluated -	% of Total Enrollment Observed/ Screened	Children Receiving MH Services	% of Observed/ Receiving MH Services
Get Set	10 Months	70	4077	448	11%	293	65%
Head Start	9 Months	20	1082	206	19%	91	44%
Follow Through	3—7 Months	7	2500	141	6%	141	100%
Follow Through Expansion	3—9 Months	27	7000	624	9%	624	100%
ECP	3-10 Months	124	14659	1419	10%	1149	81%

Data in table 1 indicating the number of Original Follow Through children observed, screened and/or evaluated represent data obtained for 7 of the 8 schools which had contracted mental health services. Specific information on that aspect of services was not available from one agency on that school. However, all 8 schools did received some form of service.

As indicated in Table 1, 141 children from seven Original Follow Through schools participated in the process and received the services provided by the agencies. A similar situation existed with the data on Follow Through Expansion schools. The data in Table 1 reflect specific services provided to 27 Follow Through Expansion schools. Across 27 schools, 624 children were observed, screened and/or evaluated. They also received whatever additional services were needed from the mental health consultants.

Data was available on service activities covering a 9 to 10 month period in the two preschool programs, Get Set Day Care and Prekindergarten Head Start, and a 3 to 9 month period in the schoolage programs, Original Follow Through and Follow Through Expansion. Overall, a total of 1419 children across the four programs were seen by mental health workers and 1149 (81%) received additional services.

2. What were the most frequently identified impairments and how many program children were associated with each impairment category?

Across the four programs, the most frequently identified impairments associated with program children were speech impairment, emotional problems, and developmental delays.

Table 2 shows the number of children with specific types of impairments or problems as identified by mental health workers. The total number of children identified in each category was: speech problems 133, emotional problems 91, developmental delays 71, specific learning disabilities 70, mental retardation 18 and hearing 3.

The major impairment category in Get Set Day Care was speech defects which was identified in 87 children. Emotional problems and developmental delay ranked second and third and was associated with 86 and 71 children respectively. In Prekindergarten Head Start, the category labeled "other health impairments" i.e., allergies, heart, anemia, etc, was the most frequent category and was identified with 62 children. Speech impairments were second and were associated with 45 children.

For the majority of children in the Original Follow Through and Follow Through Expansion programs, specific diagnostic information was not reported by most of the mental health consultants. Those children were placed in the "unspecified" category indicating that their impairment category was not reported.

3. How many contacts were made in each area of direct services to children, parents, and program staff?

Direct services were defined as classroom observations, counseling or therapy sessions with children, and diagnostic/treatment consultations with parents, staff and other program personnel. Across the four programs, the data which was received

TABLE II

TYPES OF IMPAIRMENTS OR PROBLEM AREAS
AND NUMBER OF CHILDREN IDENTIFIED WITH
EACH IMPAIRMENT

Types of Impairments	Get Set	Head Start	Follow Through	Follow Through Expansion	Total
	N	N	N	N	N
Hard of Hearing	3	0	0	0	3
Speech Impaired	87	45	1	0	133
Mental Retardation	17	1	0	0	18
Orthopedic Impaired	2	3*	N/A	N/A	5
Emotionally Disturbed	86	2	0	3	91
Specific Learning Disabled	26	8	7	29	70
Developmental Delay	71	0	0	0	71
Unspecified	N/A	N/A	133	592	725
Suspected Child Abuse and Neglect	32	N/A	N/A	N/A	32
Visually Handicapped	0	2	0	0	2
Other Health Impaired	4	62	N/A	N/A	66
** Total Number of Children With Each Impairment	328	123	141	624	1217

* In HS, physically handicapped children are also classified under Mental Health Services, although health services personnel assist these children directly and the mental health specialist may or may not be required in this situation. This report focuses only on those specifically identified as being mentally handicapped.

** Number of impairments are greater than number of children because of multiple impairments.

indicated that a minimum of 1017 contacts were associated with classroom observations, 1275 with counseling or therapy sessions, and 3180 with consultations with parents (626) and other program personnel (2454).

As indicated in Table 3, the majority of contacts made by mental health specialists in three of the four programs were related to consultations with staff and other personnel. In Get Set, they comprised 48% of the total program contacts. In Follow Through and Follow Through Expansion they comprised 54% and 61% respectively. In Head Start, the majority (34%) of the mental health specialists' contacts were directed to parents.

The second and third most frequent contacts in Get Set were counseling/therapy sessions with children (25%) and classroom observations (21%). Both Follow Through and Follow Through Expansion demonstrated similar patterns of contacts. In Follow Through and Follow Through Expansion, counseling/therapy sessions with children (32%) was followed by consultations with parents (9%) and classroom observations (6%). In the Follow Through Expansion program, 19% of the contacts were counseling/therapy sessions with children, 10% were consultations with parents and 10% were classroom observations. As indicated earlier, the majority of schools that participated in the Follow Through and Follow Through Expansion programs received services of the mental health consultants. However, specific kinds of data were unavailable from some agencies because of the way it was collected and submitted. This made it difficult to determine

TABLE 3

FREQUENCY OF DIRECT SERVICE CONTACTS
TO CHILDREN, PARENTS AND PROGRAM STAFF

Programs	Direct Services									
	Classroom Observations		Counseling/ Therapy Sessions with Children		Consultations				Total	
					Parents		Staff & Other Prog'm Personnel			
	N	%	N	%	N	%	N	%	N	%
Get Set	676	21%	825	25%	196	06%	1561	48%	3258	100
Prekinder-garten Head Start	234	25%	196	21%	312	34%	188	20%	930	100
Original Follow Through	12	06%	69	32%	19	09%	117	54%	217	100
Follow Through Expansion	95	10%	185	19%	99	10%	588	61%	967	100
Total	1017		1275		626		2454		5372	

the nature of specific services provided to the total schoolage programs. The data in Table 3 is shown to give an idea of the type of services provided, but in no exact way does it reflect the precise type of help as related to specific impairment information provided on children in those programs.

4. How many contacts were made in each area of indirect service to parents and program staff?

Indirect services consist of conducting staff development sessions and parent workshops, making referrals, and attending faculty or planning meetings. Across the four programs 197 contacts were associated with referrals, 215 with staff development and parent workshops and 319 with faculty and planning meetings.

In the Get Set program, psychologists conducted 80 staff development sessions and attend 30 parent meetings. Together, these contacts accounted for 51% of the service contacts made. Referrals accounted for 49% of the contacts.

For the psychological service specialists in Head Start, planning/faculty meetings were the most frequent contacts accounting for 63% of their total. The least frequent contacts were in the area of referrals which accounted for 16% of the contacts. Mental health specialists in the schoolage program, Follow Through and Follow Through Expansion, had their contacts evenly distributed among all indirect services

TABLE 4

Frequency of Indirect Service
Contacts with Parents and Program Staff

Programs	Referrals		Indirect Services				Total Number of Contacts	
			Staff Development and Parent Workshops		Planning/ Faculty Meetings			
	N	%	N	%	N	%	N	%
Get Set	104	49%	80	37%	30*	14%	214	100%
Prekindergarten Head Start	55	16%	70	21%	214	63%	339	100%
Original Follow Through	7	21%	15	44%	12	35%	34	100%
Follow Through Expansion	31	21%	50	35%	63	44%	144	100%
Total	197		215		319		731	

* This figure represents parent meetings

B. Summary and Conclusions

This report provided a brief description of mental health services in four Early Childhood Programs: Get Set Day Care, Prekindergarten Head Start, Original Follow Through and Follow Through Expansion. Across all four programs, 1419 children were observed, screened, or evaluated. Of these, 1149 (81%) of the children received additional services. Generally, speech impairments were the most frequently diagnosed problems across the programs. Emotional problems and developmental delay occurred most often in Get Set Day Care while the category labeled "other health impairment" and speech problems were most frequently diagnosed in Prekindergarten Head Start. For the majority of children in Original Follow Through and Follow Through Expansion, specific diagnostic information was not reported.

Direct services, consisting of diagnosed/treatment consultations, were held more frequently with staff and other program personnel in all programs except Prekindergarten Head Start. In that program classroom observations were most frequent. No discernible trend of high/low emphasis seemed evident in the provision of indirect services, which included conducting staff development sessions and parents' workshops, making referrals, and attending faculty or planning meetings.